

Index of Claims			Application No.	Applicant(s)	
			10/079,073	DELIWALA, SHRENIK	
			Examiner	Art Unit	
			Jennifer Doan	2874	
<input checked="" type="checkbox"/> Rejected <input type="checkbox"/> = Allowed		<input type="checkbox"/> (Through numeral) Cancelled <input type="checkbox"/> + Restricted	<input type="checkbox"/> N Non-Elected <input type="checkbox"/> I Interference	<input type="checkbox"/> A Appeal <input type="checkbox"/> O Objected	
Claim	Date		Claim	Date	
Final Original			Final Original		
1 11/7/03			51		
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